FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT



Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1998

DOCUMENT #

(7)

C & N CENTER INVESTMENTS, INC.

FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- 1 FUNENCE NILL NATURA JEMES HINDIN LICULE CARA HINDIN N	1801 BEBEL 8081	EFRIA ALBIT LAST
2960 NW COMMERCE PARK DRIVE 2960 NW COMMERCE PAR BOYNTON FL 33426 BOYNTON FL 33426				K DRIVE		DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualified		
						02/12/1985		
Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21						59-2496808		Not Applicable
22		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		5 Additional Required
City & Stat	e	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Cour	ountry		8. This corporation owes or has paid the current year Intangible		
24	25 29 30			Personal Property Tax due June 30. 🔀 Yes 🗌 No				
	9. Name and Address of Curr	ent Registered Agent		nel		10. Name and Address of New Registere	d Agent	
	CARO, NICHOLAS	_	'	81 Nai	ne			
2960 NW COMMERCE PARK DRIVE BOYNTON BEACH FL 33426			Ī	B2 Stre	treet Address (P.O. Box Number is Not Acceptable)			
			7	83				
			Ī	B4 City	•		85 Z	Ip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the ab	ove-nam	ed corpo			g its registered
office or ragent, I a	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was a ligations of, Section 607.0505, Flor	uthorized rida Statu	by the a tes.	corporatio	ration submits this statement for the purpose in's board of directors. I hereby accept the a	ppointment	as registered
SIGNATURE								
	Signature, typed or printed name of registered agent and title if applicable (NOTE Registered. 12. OFFICERS AND DIRECTORS 13.				ture required	ADDITIONS/CHANGES TO OFFICERS A		ODE IN 40
TITLE	DP OFFICERS A	DELETE	1.1 TITL	¢		ADDITIONS/CHANGES TO OFFICERS A	Chang	
NAME	ZICARO, NICHOLAS	_	1.2 NAN					,
STREET ADDRESS	4880 OXFORD WAY		1	EET ADDRE	ss			
CITY-ST-ZIP	BOCA RATON FL			-ST-ZIP				
TITLE	D	DELETE	2.1 TITL				Chang	ge 🔲 Addition
NAME	ZICARO, HELEN		2.2 NAM	(E				
STREET ADDRESS			2.3 STR	2.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		2. 4 CIT	Y-ST-ZIP				
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NAME			3.2 NAM	IE				
STREET ADDRESS			3,3 STA	eet addre	SS			1
CITY-ST-ZIP		Detere	_	Y-ST-ZIP	-		Chann	
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STREET ADORESS CITY-ST-ZIP				ET ADDRE	·>]
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NAME			5.2 NAM				vly	
STREET ADDRESS				ET ADDRES	s			
CITY-ST-ZIP		•		-ST-ZIP	-	÷ · ·		
TITLE		☐ DELETE	6.1 TITU				☐ Chang	e 🔲 Addition
NAME	6	6.2			٠ ,	salah dari dari dari dari dari dari dari dari		
STREET ADDRESS				et addres	s	-		į
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indicated on this annual report or supplied with this ning does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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